

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective January 1, 2003

Application or Docket Number:

10/606512  
10606512

**CLAIMS AS FILED - PART I**

|                                  | (Column 1)    | (Column 2)               |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     | 19            |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 19 minus 20 = | 0                        |
| INDEPENDENT CLAIMS               | 3 minus 3 =   | 0                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 375.00 | OR | BASIC FEE | 750.00 |
| X59=      |        | OR | X518=     |        |
| X42=      |        | OR | X84=      |        |
| +140=     |        | OR | +280=     |        |
| TOTAL     |        | OR | TOTAL     |        |

**CLAIMS AS AMENDED - PART II**

|  | (Column 1) | (Column 2)                         | (Column 3)               |
|--|------------|------------------------------------|--------------------------|
| CLAIMS REMAINING AFTER AMENDMENT               |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 19         | 20                                 |                          |
| Independent                                    | 4          | 2                                  |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                    | <input type="checkbox"/> |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X59=             |                | OR | X518=            |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|  | (Column 1) | (Column 2)                         | (Column 3)               |
|--|------------|------------------------------------|--------------------------|
| CLAIMS REMAINING AFTER AMENDMENT               |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  |            |                                    |                          |
| Independent                                    |            |                                    |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                    | <input type="checkbox"/> |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X59=             |                | OR | X518=            |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|  | (Column 1) | (Column 2)                         | (Column 3)               |
|--|------------|------------------------------------|--------------------------|
| CLAIMS REMAINING AFTER AMENDMENT               |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  |            |                                    |                          |
| Independent                                    |            |                                    |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                    | <input type="checkbox"/> |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X59=             |                | OR | X518=            |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20."

\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3."

\* If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.